Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorne	ey Docket	No.	4041J-000811	
First Inventor Kaz		Kaz	ushi Shikata et al	
Title	Vehicle	Air Co	nditioner	
Express Mail Label No.		bel No	EL 623 524 722 US	

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) Mail Stop Patent Application **APPLICATION ELEMENTS** Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 1. Fee Transmittal Form (e.g., PTO/SB/17) 7. CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. 🔲 Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) з. 🔯 Specification (Total Pages a. Computer Readable Form (CRF) (preferred arrangement set forth below) b. Specification Sequence Listing on: Descriptive title of the Invention i. CD-ROM or CD-R (2 copies); or Specification - Cross References to Related Applications filed in English ii. 🗌 paper - Statement Regarding Fed sponsored R & D c. Statements verifying identity of above copies - Reference to sequence listing, a table, or a computer program listing appendix **ACCOMPANYING APPLICATIONS PARTS** - Background of the Invention - Brief Summary of the Invention 9. 🔯 Assignment Papers (cover sheet & document(s)) - Brief Description of the Drawings (if filed) 10. 37 C.F.R.§3.73(b) Statement ☐ Power of - Detailed Description (when there is an assignee) Attorney - Claim(s) - Abstract of the Disclosure 11. 🔲 English Translation Document (if applicable) 4. 🛛 Drawing(s) (35 U.S.C.113) [Total Sheets 12. 🛛 Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 5. Oath or Declaration [Total Pages | 4 13. 🔲 **Preliminary Amendment** a. Newly executed (original or copy) 14. 🛛 Return Receipt Postcard (MPEP 503) b. Copy from a prior application (37 CFR 1.63 (d)) (Should be specifically itemized) (for a continuation/divisional with Box 18 completed) 15. Certified Copy of Priority Document(s) i. DELETION OF INVENTOR(S) (if foreign priority is claimed) Signed statement attached deleting inventor(s) 16. Request and Non Publication under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. 6. Application Data Sheet. See 37 CFR 1.76 17. 🔲 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: □ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: ___ Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 17. CORRESPONDENCE ADDRESS 27572 or

Correspondence address below □ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Harness, Dickey & Pierce, P.L.C. Name P.O. Box 828 Address City **Bloomfield Hills** MI 48303 State Zip Code Country United States of America Telephone 248-641-1600 Fax 248-641-0270 Name (Print/Type) H. Keith Miller, Esq Registration No. (Attorney/Agent) 22,484 Signature Date November 20, 2003



PTO/SB/17 (01-03)

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FEE TO ANOMITTAL	Complete if Known				
FEE TRANSMITTAL	Application Number	To be assigned			
for FY 2004	Filing Date	November 20, 2003			
	First Named Inventor	Kazushi Shikata et al			
Patent fees are subject to annual revision.	Examiner Name				
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit				
TOTAL AMOUNT OF PAYMENT (\$) 810	Attorney Docket No.	4041J-000811			

Check Credit card Money Other None Order	METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)						
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	**or number prev	iously paid,	if greater; For Reissues, see above								

SUBMITTED BY		Complete (if applicable)				
Name (Print/Type)	H. Keith Miller, Esq.	Registration No. Attordey/Agent)	22,484	Telephone	248-641-1600	
Signature		KUSHW -		Date	November 20, 2003	